

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | T-G | | 6/22/01 |
| O.I.P.E. CLASSIFIER | | 49 | 7/2/01 |
| FORMALITY REVIEW | EP | 1125 | 8/10/01 |
| RESPONSE FORMALITY REVIEW | pp | 1030 | 10-23-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

BEST AVAILABLE COPY

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | | 11/12/00 | |
| 2 | | 03/01/00 | |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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10-24-01
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10/24/01